

B02000000141

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
 08 OCT 14 PM 1:35
 TALLAHASSEE, FLORIDA
 SECRETARY OF STATE

LIMITED PARTNERSHIP REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # B02000000141

1. Name of Limited Partnership

CASA Partners II, L.P.

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2. Principal Office Address - No P.O. Box # 737 N. Michigan Ave		3. Mailing Office Address 737 N. Michigan Ave	
Suite, Apt. #, etc. Suite 1700		Suite, Apt. #, etc. Suite 1700	
City & State Chicago, IL		City & State Chicago, IL	
Zip 60611	Country USA	Zip 60611	Country USA

4. Date Formed or Registered To Do Business in Florida 5/1/2002

5. FEI Number 01-0588041	Applied For Not Applicable
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6. CERTIFICATE OF STATUS DESIRED \$5.75 Additional Fee required for a Certificate of Status

CR2E039 (1/07)

8. Name and Address of Current Registered Agent

Name
CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #; Etc.

City
Plantation

State
FL

Zip Code
33324

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records.

A \$500 penalty is due for each year or part thereof the entity's certificate of authority was revoked on our records, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the \$500 penalty fee(s) be waived.

9. Pursuant to the provisions of sections 620.14(1) or 620.1902, Florida Statutes, I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of Chapter 620, Florida Statutes

SIGNATURE (Registered Agent Accepting Appointment) *Kristine Heiberger* **Kristine Heiberger**
 (REGISTERED AGENT MUST SIGN) **Assistant Secretary** DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
Henderson Global Investors GP, L.L.C.	737 N. Michigan Ave., Ste 1700	Chicago, IL 60611	M02000001114
REINSTATEMENT 2003-2008 200137109322 10/21/08--0100--004 ***6000.00			

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to file this report as required by chapter 620, Florida Statutes.

SIGNATURE *Megan Wolfinger* DATE 9/30/08
 Megan Wolfinger, Secretary of General Partner Telephone Number 312-475-7010